

UNDERGRADUATE CURRICULAR/ADVISEMENT CHANGE FORM

Student Name: _____ ID#: _____

Current Major: _____ Current Advisor: _____

Student Signature: _____ Date: _____

Department (College) Office Use Only: CHECK APPROPRIATE ITEM(S) AND FILL IN BLANK(S)

MAJOR CHANGE		Plan	Version
Add	Delete	_____	_____
Add	Delete	_____	_____
Add	Delete	_____	_____

MINOR CHANGE			
Add	Delete	_____	_____
Add	Delete	_____	_____
Add	Delete	_____	_____

ADVISOR CHANGE		Advisor	Plan
Add	Delete	_____	_____
Add	Delete	_____	_____
Add	Delete	_____	_____

Student's Cumulative Average: _____ Date Earned: _____

APPROVED BY:

Dept Chair: _____ **Date:** _____

College Dean: _____ **Date:** _____

SEE REVERSE SIDE FOR INSTRUCTIONS

Attn.: Registrar's Office, P.O. Box 730, Kutztown, PA 19530
Phone: (610) 683-4485 Fax: (610) 683-1586 Email: regoffice@kutztown.edu